FORM (RF-3)

	Change in Company's premium or	· ·	erevision			
	effective 10/1/2014	<u>_</u> ·				
	(1)	(2) Annual Premium	(3) Percent			
	Coverage	Volume (Illinois) *	Change (+or-) **			
1.	Automobile Liability Private					
	Passenger					
	Commercial					
2.	Automobile Physical Damage					
	Private Passenger					
	Commercial					
3.	Liability Other Than Auto					
4.	Burglary and Theft					
5.	Glass					
6.	Fidelity					
7.	Surety					
8.	Boiler and Machinery					
9.	Fire	\$1,553,379	3.60%			
10.	Extended Coverage					
	Inland Marine					
12.	Homeowners					
	Commercial Multi-Peril					
	Crop Hail					
	Other		_			
	Life of Insurance		,			
	Does filing only apply to certain ter Classes? If so, specify: No.	ritory (territories) or certain				
	Brief description of filing. (If filing for	ollows rates of an advisory				
	Organization, specify					
	organization): We changed our package r	modification factors and revised the u	nderlying loss cost multipliers			
	organization). The dialign out passage i	Todanica (ici) Tadici o ana Tovicco (ici) a	nashying 1000 doct maniphers.			
	*Adjusted to reflect all prior rate ch **Change in Company's premium		application of new rates.			
		Allied Property 8	& Casualty Insurance Company			
			ne of Company			
			well - State Filing Specialist			
			Official – Title			

FORM (RF-3)

	(1)	(2)	(3) Percent			
	•	Annual Premium				
	Coverage	Volume (Illinois) *	Change (+or-) **			
	omobile Liability Private					
	senger					
	nmercial					
	omobile Physical Damage					
	ate Passenger					
Con	nmercial					
Liab	ility Other Than Auto					
Burg	lary and Theft					
Glas	ss					
Fide	lity					
Sure	ety					
Boile	er and Machinery					
Fire		\$1,885,242	6.00%			
. Exte	nded Coverage					
. Inlar	nd Marine					
. Hom	neowners					
. Con	mercial Multi-Peril					
. Crop	hail `					
. Oth	er					
	Life of Insurance	-				
Doe	Does filing only apply to certain territory (territories) or certain					
Clas	ses? If so,					
spe	cify: No.					
	Brief description of filing. (If filing follows rates of an advisory					
Org	anization, specify					
orga	organization): We changed our package modification factors and revised the underlying loss cost multipliers.					
•	usted to reflect all prior rate ch	_				
**Cł	nange in Company's premium	level which will result from	application of new rates.			
			O Insurance Company			
			me of Company			
			dwell - State Filing Specialist			
		(Official – Title			

Change in Company's premiu revision effective <u>07/01/20</u> 1		by rate ·
(1)	(2)	(3)
	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
 Automobile Physical Damage Private Passenger 		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
 Surety Boiler and Machinery 		
9. Fire	1,047,535 (Written)	-13.8
10. Extended Coverage	1,017,555 (**********************************	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: No	territory (territories)o	r certain classes?
Brief description of filing. (If organization, specify organization		ne changes contained in ISO
		
<pre>* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new</pre>	vel which will	
Ar	merican Alternative Insur	ance Corporation
	Name of Compa	any
	-	
	Steph). With	
		Vice President

Official - Title

Form (RF-3) Form (RF-3)

SUMMARY SHEET

Change	in	Company's	premium	or	rate	level	produced	by	rate
revisio	on e	effective	07/01/2014						

	Tevision effective 0//01/201		_ *
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
ર	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity	····	
	Surety		
	Boiler and Machinery		
	Fire	6,016 (Written)	-13.8
10.	Extended Coverage		
	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		·
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	s filing only apply to certain so, specify: No	territory (territories)	or certain classes?
			-
Bri	ef description of filing. (If	filing follows rates of	an advisory
	anization, specify organization	 AFH proposes to adopt th 	e changes contained in ISO
,	, , , , ,	Revision Designation Num 07/01/2014.	ber: CL-2014-OMIN1 on
		0770172014.	
* *	Adjusted to reflect all prior r Change in Company's premium lev result from application of new	vel which will	
		American Family Home In	surance Company
		Name of Comp	any
	•		
		0 0	
		10000 0 0 0	
		Malz Ris	
			President
		Official - T	itle

H29219D

Form (RF-3) Form (RF-3)

SUMMARY SHEET

Change in Company's premiu revision effective $07/01/201$	m or rate level produced 4	by rate ·
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	- Add Annual Control of the Control	
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto 4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	25,137 (Written)	-13.8
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain If so, specify: No	territory (territories)o	r certain classes?
Brief description of filing. (If organization		changes contained in ISO
* Adjusted to reflect all prior a ** Change in Company's premium lev result from application of new	vel which will	
	American Southern Home In	surance Company
	Name of Compa	
	Malz Ries	President
-		tle

H29219D

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2014

_	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger	- Totaline (Immere)	
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
9.	Fire	6,160	+4.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No		
	Brief description of filing. (If fi Organization, specify organization): CF-2009-RLC09; CF-2009-RRU09; LI-CI	Adopt the following ISO rev	dvisory visions and revise company LCM.
	 		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		t from application of new
	Tates.	Amerisure Mutual II	nsurance Company
			ne of Company
			or Compliance Analyst
			Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate le	vel produced by rate revision effective	8/1/2014
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
11. 12. 13. 14. 15.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	\$3,831,658 territories) or certain classes? If so, specify:	6.8% No
Fili *Ac	ng to adopt ISO's Loss Costs and	rates of an advisory organization, specify organized our Loss Cost Multipliers. hich will result from application of new rates	
		<u>Citizens Insura</u>	nnce Company of America lame of Company Sr. Actuarial Pricing Analyst
			Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		8/1/2014	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (terri			
Brief description of filing. (If filing follows rates Filing to adopt ISO's Loss Costs and rev	s of an advisory organization, specify o	rganization):	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	Citizens Insu	s. rance Company of Illinois Name of Company	
	Susan M. O'Neill	~ Sr. Actuarial Pricing Analyst Official – Title	

FORM (RF-3)

(1)	(2) Annual Premium	(3) Percent			
Coverage	Volume (Illinois) *	Change (+or-) **			
Automobile Liability Private					
Passenger					
Commercial					
Automobile Physical Damage					
Private Passenger					
Commercial					
iability Other Than Auto					
Burglary and Theft					
Glass					
Fidelity					
Surety					
Boiler and Machinery					
Fire	\$737,621	3.00%			
Extended Coverage					
nland Marine					
Homeowners					
Commercial Multi-Peril					
Crop Hail					
Other					
Life of Insurance					
Does filing only apply to certain t	erritory (territories) or certair	1			
Classes? If so,					
specify: <u>No.</u>					
Date description of filing (If filing follows rates of an advisor)					
Brief description of filing. (If filing follows rates of an advisory					
Organization, specify					
organization): We changed our package modification factors and revised the underlying loss cost multipliers.					
*A divisted to unfloat all prior rate changes					
*Adjusted to reflect all prior rate of	onanges.				
*Adjusted to reflect all prior rate of	a level which will result from	anniication ot new rate			
'Adjusted to reflect all prior rate of the company's premium	n level which will result from	application of new rate			
•		•			
•	Deposit	ors Insurance Company			
•	Deposit	•			

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage	-	
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$25,627	5.9%
10.	Extended Coverage	\$40,014	5.9%
11.	Inland Marine	·	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory	(territories) or certain classes? If so, specify:	
Brief (description of filing. (If filing follow	ws rates of an advisory organization, specify of	organization):
ISO			organization).
100	· · · · · · · · · · · · · · · · · · ·	·	

EMC Property & Casualty Company

Name of Company

Linda Samson-Assistant Secretary
Official - Title

result from application of new rates.

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger Commercial		
2	Automobile Physical Damage		
2.	Private Passenger Commercial	-	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$133,977	4.1%
10.	Extended Coverage	\$255,957	4.1%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
<u></u>		erritories) or certain classes? If so, spe	
ISO			· · ·
130		• .	
			·
	ljusted to reflect all prior rate change nange in Company's premium level w		

EMCASCO Insurance Company
Name of Company

Linda Samson-Assistant Vice President

Official - Title

Official - Title

	Change in Company's premium of fac	e level produced by rate revision effec	tive 8/1/14
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
,			
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		····
7.	Surety		
8.	Boiler and Machinery	C240 741	2.40/
9.	Fire	\$248,741	2.4%
10.	Extended Coverage	\$369,095	2.4%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
-		erritories) or certain classes? If so, spe	
ISO			
** C	djusted to reflect all prior rate change hange in Company's premium level we sult from application of new rates.		
			Employers Mutual Casualty Company Name of Company
			reading of Company
		I	

FORM (RF-3)

	Change in Company's premium or effective 7/4/2014	rate level produced by ra	te revision			
	(1)	— · (2) Annual Premium	(3) Percent			
	Coverage	Volume (Illinois) *	Change (+or-) **			
1.	Automobile Liability Private	(
	Passenger					
	Commercial					
2.	Automobile Physical Damage					
	Private Passenger					
	Commercial	·				
3.	Liability Other Than Auto					
4.	Burglary and Theft					
5.	Glass					
6.	Fidelity					
7.	Surety					
8.	Boiler and Machinery					
9.	Fire	338,888	+9.1%			
10.	Extended Coverage					
11.	Inland Marine					
12.	Homeowners					
13.	Commercial Multi-Peril					
14.	Crop Hail					
15.	Other					
	Life of Insurance					
	Does filing only apply to certain ter	ritory (territories) or certai	in			
	Classes? If so,					
	specify: Filing applies to all territories.					
	Brief description of filing. (If filing f	ollows rates of an advisor	у			
	Organization, specify					
	organization): Base rate change.					
	*Adjusted to reflect all prior rate changes.					
	**Change in Company's premium	•	application of new rates.			
		General C	Casualty Insurance Company			
			ame of Company			
			AVP, Senior Product Manager			
			Official – Title			

FORM (RF-3)

Change in Company's premium o	r rate level produced by rate revision
effective 07/01/2014	•

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag	- · · · · · · · · · · · · · · · · · · ·	
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
Э.	Fire	34,409	-2%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certain	n territory (territories) or	certain
	Classes? If so,	in territory (territories) or	Certain
	specify:		
	Brief description of filing. (If fil	ing follows rates of an a	edvisory
	Organization, specify	mig remotes rated or arriv	
	organization):	Adopting IL Mine Subsidence F	Rule changes found in IMSIF Circular 06 (11/13).
	Revisions include changes to rating form	ula and a 13.8% rate decrease in	rates.
	*Adjusted to reflect all prior ra	te changes.	
	**Change in Company's prem		Ilt from application of new
	rates.		
		Great American A	lliance Company
r	Tony Pedoto	Na	me of Company
į-	Town 2 dato 2014.05.07	Divisional Vice Pre	
- F	- 1 2 2 4 3 4 3 4 3 1 A · A 7 · A 2 - O A · C	<u></u>	Official – Title

FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 07/01/2014	,

-	(1)	An	(2) nual Premium	(3) Percent
	Coverage	Vol	ume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private			
	Passenger			
	Commercial			
2	Automobile Physical Damag			 -
	Private Passenger			· · · · · · · · · · · · · · · · · · ·
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire	10,071		-2%
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other			
	Life of Insurance			
•	Daga filima anku	4		
	Does filing only apply to certain Classes? If so,	n terni	ory (territories) or t	сепаіп
	specify:			
	specify.			
	Brief description of filing. (If file	ling foll	owe rates of an ad	lvicon
	Organization, specify	iirig içii	OWS Tales Of all ac	IVISOI y
	organization):	hA	opting II. Mine Subsidence Rul	e changes found in IMSIF Circular 06 (11/13).
	Revisions include changes to rating form			
	Trevisions include onlying to ruling form	aia aria a	10.070 Tate deorease in t	atoo.
	*Adjusted to reflect all prior rai	te char	nges.	
	**Change in Company's premi			from application of new
	rates.			
	F		Great American Ass	surance Company
	Tony / Red 2014.05.07 14	:48:07		ne of Company
	3-04'00'		Divisional Vice Presi	
			0	fficial – Title

FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 07/01/2014	

-	(1)		(2) nual Premium	(3) Percent
1.	Coverage	VOIL	ume (Illinois) *	Change (+or-) **
2	Commercial Automobile Physical Damag			
	Private Passenger			•
_	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6. 7	Fidelity			
7. 8.	Surety Poiler and Machiner		, , , , , , , , , , , , , , , , , , , 	
o. 9.	Boiler and Machinery Fire	17.466		200/
10.	Extended Coverage	17,466		-2%
11.	Inland Marine			
12.	Homeowners			- Company of the Comp
13.	Commercial Multi-Peril			
14.	Crop Hail		· ·	
15.	Other			
	Life of Insurance	· ·		
•	Daga filing only apply to gortai	n denembe	nm:/torritorion\or	aartaia
	Does filing only apply to certai Classes? If so,	n territo	ory (terniones) or	cenain
	specify:			
	Brief description of filing. (If fil Organization, specify organization):	•		dvisory ule changes found in IMSIF Circular 06 (11/13).
	Revisions include changes to rating formu	la and a	13.8% rate decrease in	rates.
	*Adjusted to reflect all prior rat **Change in Company's premi rates.			t from application of new
<i>4</i>	Tony Pedoto		Great American Ins	surance Company
	Tom Se 000 2014.05.07 14:4	3:30		ne of Company
Š.s.	1.7 \$2.4.1.1.1.2 Etc. 3-04.00		Divisional Vice Pres	
				Official – Title

FORM (RF-3)

Change in Company's premi	um or rate level produced by	y rate revision
effective 07/01/2014	<u></u> .	
(1)	(2)	(3)
\''/	(2)	(3)

-	(1)	Anr	(2) nual Premium	(3) Percent		
-	Coverage		ıme (Illinois) *	Change (+or-) **		
1.	Automobile Liability Private					
	Passenger					
	Commercial					
2	Automobile Physical Damag					
	Private Passenger			•		
	Commercial					
3.	Liability Other Than Auto					
4.	Burglary and Theft		 			
5.	Glass					
3.	Fidelity					
7.	Surety					
3.	Boiler and Machinery					
€.	Fire	51,823		-2%		
10.	Extended Coverage					
11.	Inland Marine			· · · · · · · · · · · · · · · · · · ·		
12.	Homeowners					
13.	Commercial Multi-Peril	<u> </u>				
14.	Crop Hail					
15.	Other			· ·		
	Life of Insurance					
•	Does filing only apply to certa	in territ	orv (territories) o	r certain		
	Classes? If so,		, (, -			
	specify:					
	Brief description of filing. (If f	iling foll	ows rates of an	advisory		
	Organization, specify	-				
	organization):	Ad	opting IL Mine Subsidence	Rule changes found in IMSIF Circular 06 (11/13).		
	Revisions include changes to rating form	rula and a	13.8% rate decrease i	n rates.		
	*Adjusted to reflect all prior ra					
	**Change in Company's prem	ılum lev	el which will resi	ult from application of new		
	rates.		O	Anna Anna Anna Anna Anna Anna Anna Anna		
	Tony Pedoto			nsurance Company of New York		
	Tow Redots 2014.05.07 1	4:48:48	Na Divisional Vice Pre	ame of Company		
	2 X 2 4 2 2 2 2 3 3 5 - U4'UU'		DIVISIONAL VICE PRE	Official – Title		
				Onda - rile		

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
•	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Private Passenger		
	Commercial		
	Liability Other Than Auto		· · · · · · · · · · · · · · · · · · ·
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire	\$2,760	0.0%
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: no.		
	Brief description of filing. (If fi	iling follows rates of an a	dvisory
	Organization, specify	ining follows rates of all a	avisory
	organization):	Refiling current rates with	minor changes to modernize page
	0/ga/11251/0/1/		
	*Adjusted to reflect all prior ra	te changes.	
	**Change in Company's premates.	ium level which will resu	It from application of new
	iales.	Grinnell Mutual Re	einsurance Company
			me of Company
		Kimberley A. Ward,	•
			Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate rev		vel produced by rate revision effective	8/1/2014
	(1) <u>Coverage</u>	(2) Annuał Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
11. 12. 13. 14. 15.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	\$1,513,136 territories) or certain classes? If so, specify:	7.1%
Fili		rates of an advisory organization, specify org revise our Loss Cost Multipliers.	ganization):
		hich will result from application of new rates.	
			r Insurance Company ame of Company
		Susan M. O'Neill ~	Sr. Actuarial Pricing Analyst Official – Title

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	·	
8.	Boiler and Machinery		
9.	Fire	\$1,555,996	2.4%
10.	Extended Coverage	\$2,249,931	2.4%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does fil	ling only apply to certain territory (territories) or certain classes? If so, specify:	
Brief de ISO		s rates of an advisory organization, specify of	organization):

** Change in Company's premium level which will result from application of new rates.

Illinois EMCASCO Insurance Company

Name of Company

Linda Samson-Assistant Secretary Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate le	evel produced by rate revision effective	8/1/2014
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
11. 12. 13. 14. 15.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	\$3,043,998 territories) or certain classes? If so, specify:	7.2% No
Brie Fili	ef description of filing. (If filing follows ng to adopt ISO's Loss Costs and lijusted to reflect all prior rate changes	rates of an advisory organization, specify organization, specify organization, specify organization of new rates Massachusetts	ganization):
			Sr. Actuarial Pricing Analyst Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>August 1, 2014.</u>

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burgulary and Theft 		
5 Glass 6 Fidelity 7 Surety		
8 Boiler and Machinery 9 Fire 10 Extended Coverage 11 Inland Marine 12 Homeowners 13 Commercial Multi-Peril 14 Crop Hail 15 Worker's Compensation 16 Other - Farmowners Line of Insurance Does filing only apply to certain territory (territorical fiso, specify: No	300,000 600,000 es) or certain classes?	7%
Brief description of filing. (if filing follows rates of organization, specify organization): and territory 3-6 by 15%. New business will only be written to	Increase rates in territory 1	
Adjusted to reflect all prior rate changes Change in Company's premium level which will result from application of new rates.	Tricio Mickley MA Co	rroll Mutual
	Tricia Mickley - Mt Ca Name of	Company

Sec-Treas

Official - Title

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private		
•	Passenger		
	Commercial		
	Automobile Physical Damage		
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		<u> </u>
	Surety	11 Aug. 1 Aug	
•	•		
'- -	Boiler and Machinery Fire	#05 F40	0.500/
•	•	\$85,518	0.50%
	Extended Coverage Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
5 .	Other		
	Life of Insurance		
	Does filing only apply to certain tell Classes? If so,		
	specify: No.		
	specify: No.		
	specify: No. Brief description of filing. (If filing for		
	Specify: No. Brief description of filing. (If filing for Organization, specify	ollows rates of an advisory	
	specify: No. Brief description of filing. (If filing for	ollows rates of an advisory	
	Brief description of filing. (If filing for Organization, specify organization): We adjusted the contractor	ollows rates of an advisory	
	Brief description of filing. (If filing for Organization, specify organization): We adjusted the contractor	ollows rates of an advisory s package modification factor, update	ed the minimum premium, and
	Brief description of filing. (If filing for Organization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory s package modification factor, update nanges. level which will result from	ed the minimum premium, and application of new rates.
	Brief description of filing. (If filing for Organization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory s package modification factor, update nanges. level which will result from	ed the minimum premium, and application of new rates. utual Fire Insurance Company
	Brief description of filing. (If filing for Organization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory as package modification factor, update nanges. level which will result from Nationwide M	ed the minimum premium, and application of new rates.

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private	· oldillo (limitolo)	
	Passenger		
	Commercial		
	Automobile Physical Damage		
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire	\$280,360	2.00%
١.	Extended Coverage		· · · · · · · · · · · · · · · · · · ·
	Inland Marine		·
2.	Homeowners		
3.	Commercial Multi-Peril		
ŀ.	Crop Hail		
١.	Other		
	Life of Insurance		, , , , , , , , , , , , , , , , , , , ,
	Does filing only apply to certain te Classes? If so,	rritory (territories) or certair	
	opcony. <u>No.</u>		
	Brief description of filing. (If filing f		
	Brief description of filing. (If filing f Organization, specify	ollows rates of an advisory	
	Brief description of filing. (If filing f	ollows rates of an advisory	
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor	ollows rates of an advisory	
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory s package modification factor, update	ed the minimum premium, and
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor revised our deductible plan.	ollows rates of an advisory s package modification factor, update	ed the minimum premium, and
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory s package modification factor, update nanges. level which will result from	ed the minimum premium, and
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory s package modification factor, update nanges. level which will result from	ed the minimum premium, and application of new rates Mutual Insurance Company
	Brief description of filing. (If filing forganization, specify organization): We adjusted the contractor revised our deductible plan. *Adjusted to reflect all prior rate characters.	ollows rates of an advisory rs package modification factor, update nanges. level which will result from Nationwide Nar	ed the minimum premium, and

FORM (RF-3)

	1) erage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
Automobile Li				
Passenger	·			
Commercial	•			
Automobile Ph	nysical Damage			
Private Passe	nger			
Commercial	_			
Liability Other	Than Auto			
Burglary and T	heft			
Glass				
Fidelity				
Surety				
Boiler and Mad	hinery			
Fire		\$197,385	0.30%	
Extended Cove	erage		***	
Inland Marine				
Homeowners				
Commercial M	ulti-Peril .			
Crop Hail				
Other				
Life	of Insurance			
Classes? If so,		rritory (territories) or certai		
Organization, so	pecify We adjusted the contractor	ollows rates of an advisory		
revised our deduction	revised our deductible plan.			
	flect all prior rate ch ompany's premium	nanges. level which will result from	application of new rates.	
		Nationwide Prope	erty & Casualty Insurance Compan	
			me of Company	
			Idwell - State Filing Specialist	

FORM (RF-3)

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	Tolding (minolo)	
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	<u></u>	
Fire	2.057.027	0.0%
· · · =	3,057,927	-2.6%
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Line of Insurance		
Does filing only apply to certa Classes? If so,	in territory (territories) o	r certain
specify: No.		
Specify.		
Brief description of filing. (If fi	ling follows rates of an a	advisorv
Organization, specify	3	•
Organization, Specify		and apple Deforming filling OF 2044 F
organization):	Adopting ISO countrywide I	oss costs, Reference filing: CF-2011-R
, ,		
organization):		
organization): Revising Mine Subsidence Premiums, R *Adjusted to reflect all prior ra **Change in Company's prem	eference filing: CL-2014-OMIN1. te changes.	
organization): Revising Mine Subsidence Premiums, R *Adjusted to reflect all prior ra	eference filing: CL-2014-OMIN1. te changes. ium level which will rest	ult from application of nev
organization): Revising Mine Subsidence Premiums, R *Adjusted to reflect all prior ra **Change in Company's prem	te changes. ium level which will resu	ult from application of nev
organization): Revising Mine Subsidence Premiums, R *Adjusted to reflect all prior ra **Change in Company's prem	te changes. ium level which will resu	ult from application of nev

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
-	Automobile Liability Private	volume (minois)	- Change (101-)
	Passenger		
	Commercial		4
	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire	1,318,694	-5.6%
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
	Does filing only apply to certain Classes? If so,	in territory (territories) or	certain
	specify: No No		,
	Brief description of filing. (If file Organization, specify organization):	. •	Idvisory revisions, revise Annual Business Income Cove
	and Mine Subsidence Premium revisions. For deductible	es, we are implementing a company exception	on table that will no longer vary with limit of insur
	For ABI, we are changing the exposure base to gross sales	to simplify rating. We are also revising ABI exp	osure and rate factors to recognize differences by r
	*Adjusted to reflect all prior rai		It from application of new
	rates.	Sentry Select Insu	rance Company
			me of Company
		Mike Williams	Dry a dry upwa by Mar w Bums. DN consider Williams, a. y as trod-error will enterer try zone, c-US Dwg, 281407 2812 (2) 907-90 90
			Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>07/01/2014 New & Renewal</u>.

	(1)	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **		
1.	Coverage Automobile Liability Private	Aointie (illinois)	<u> </u>		
1.	Passenger				
	Commercial				
2.	Automobile Physical Damage				
۲.	Private Passenger				
	Commercial				
3.	Liability Other Than Auto				
4.	Burglary and Theft				
5.	Glass				
6.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire	397,362 (2013 DWP)	5.0%		
	Extended Coverage	302,505 (2013 DWP)	0.0%		
	Inland Marine				
	Homeowners				
	Commercial Multi-Peril				
	Crop Hail Other				
15.	Life of Insurance				
	Does filing only apply to certain Classes? If so, specify: N/A	territory (territories) or certa	ain		
	Spoons. 1473				
	Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Coverage A base rates will be increased by 5.0%. New endorsement Equipment Breakdown Enhancement Endorsement E 190 05 14 will be rolled on without charge.				
	OTAL MO.				
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.				
		Standard Mutua	i Insurance Company		
		N	lame of Company		
		<u>Larry L. Boehm,</u>	CPCU - Assistant Underwriting		
Manag	er		Official - Title		